



**SYSTEMS
DEVELOPMENT
MATERIALS**



**Drugs and Medical
Supplies System Workbook**

**General Supplies System
Workbook**

**Facilities and
Equipment Maintenance
System Workbook**

**Transportation System
Workbook**



THE MEDEX PRIMARY HEALTH CARE SERIES

After completion of extensive field trials in Micronesia and in primary health care programs in Lesotho, Guyana, Pakistan, and Thailand, the methods and materials of the MEDEX technology have been published as The MEDEX Primary Health Care Series. The Series provides a systematic, practical, adaptable format for management and training in new or existing primary health care programs at all levels.

The 35-volume Series is organized into three major categories of Management Systems Development

Materials, Mid-Level Health Worker Training Materials, and Community Health Worker Training Materials. The Series is appropriately balanced between promotive, preventive, and curative needs in primary health care.

The methods and materials of the MEDEX technology are suitable for national scale programs as well as smaller projects, and can be used in whole or in part as circumstances demand. One of the greatest strengths of the MEDEX technology is its flexibility and sensitivity to local conditions.

VOL.

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The Systems Development Materials include a module for training management analysts, workbooks for use in analyzing management systems, and a manual for conducting district and national planning and management workshops.

- 2 *Student Text and Instructor's Manual* Management Analysis Training Module
3 *Drugs and Medical Supplies System Workbook*
General Supplies System Workbook
Facilities and Equipment Maintenance System Workbook
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4 *Communication System Workbook*
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Health Information System Workbook
5 *District and National Planning and Management Workshops Manual*

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The Mid-Level Health Worker Training Materials, which can be adapted to the specific needs of a country, include procedures and materials for preparing instructors, evaluation preparation for the country of training, and developing continuing education materials ensure that they will need to provide health care services, to a small health facility, a community health worker

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- 7 *Continuing Education Manual*

- 8 *Training Evaluation Manual*

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Meeting the Preventive Health Needs of the Community
Training and Supporting Community Health Workers

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- 16 *Student Text* 17 *Instructor's Manual* Skin
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- 18, 19 *Student Text* 20 *Instructor's Manual* Infectious Diseases
Other Common Problems

Maternal and Child Health Modules

- 21 *Student Text* 22 *Instructor's Manual* Prenatal Care
Labor and Delivery

Reference Manuals

- 28 *Formulary*
Diagnostic and Patient Care Guides
29 *Patient Care Procedures*
30 *Health Center Operations*
31 *Community Health*
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The workbooks can be used to train new community health workers or to provide continuing education for existing community health workers. To prepare mid-level health workers to train community health workers, these workbooks are used along with the community health modules.

- 23 *Introduction to Training*
24 *Water and Clean Community*
25 *Prevention and Care of Diarrhea*
26 *Pregnancy*
27 *Feeding and Caring for Children*
28 *Common Health Problems*
29 *Tuberculosis and Leprosy*

Community Learning Materials:
Problems in the Community
For Your Child
For Your Sick Child
Home and Clean Community
Methods for Training Community Health Workers

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**DRUGS AND MEDICAL SUPPLIES
SYSTEM WORKBOOK**

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The MEDEX Primary Health Care Series

DRUGS AND MEDICAL SUPPLIES SYSTEM WORKBOOK

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Prepared for _____

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Date completed _____

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Ordering List for Workbook Forms

Form 1: LIST OF PERSONS INTERVIEWED	_____	Form 13: FUNCTIONS OF THE SYSTEM	_____
Form 2: LIST OF DOCUMENTS REVIEWED	_____	Form 14: SUMMARY OF FORM 5	_____
Form 3: SCHEDULE FOR THE MONTH OF _____	_____	Form 15: SUMMARY OF FORM 6	_____
Form 4: WORK FLOW ANALYSIS	_____	Form 16: SUMMARY OF FORM 7	_____
Form 5: INVENTORY OF DRUGS AND MEDICAL SUPPLIES	_____	Form 17: SUMMARY OF FORM 8	_____
Form 6: PROCEDURES FOR REQUISITIONING, RECEIVING, AND STORING DRUGS AND MEDICAL SUPPLIES	_____	Form 18: SUMMARY OF FORM 9	_____
Form 7: LOCAL PURCHASING PRACTICES	_____	Form 19: SUMMARY OF FORM 10	_____
Form 8: RESOURCES OF THE DRUGS AND MEDICAL SUPPLIES SYSTEM	_____	Form 20: SUMMARY OF FINDINGS AND CONCLUSIONS	_____
Form 9: PROCEDURES FOR ORDERING AND DISTRIBUTING DRUGS AND MEDICAL SUPPLIES	_____	Form 21: STATEMENT OF PROBLEM AND ROOT CAUSES	_____
Form 10: POLICIES AND ORGANIZATION OF THE DRUGS AND MEDICAL SUPPLIES SYSTEM	_____	Form 22: ANALYSIS OF FORCES AFFECTING CHANGE	_____
Form 11: VALIDATION OF FORM _____	_____	Form 23: ALTERNATIVE PROBLEM-SOLVING APPROACHES	_____
Form 12: OBJECTIVES OF THE SYSTEM	_____	Form 24: ALTERNATIVE RECOMMENDATIONS FOR CONCLUSION _____	_____

SECTION 1

INTRODUCTION

This is one of eight workbooks in a series designed to guide you in analyzing the management systems needed to support the delivery of primary health care services. The eight management support systems are:

- Drugs and Medical Supplies
- General Supplies
- Facilities and Equipment Maintenance
- Transportation
- Communication
- Personnel
- Finance
- Health Information

This workbook will help you conduct a comprehensive study of the drugs and medical supplies system leading to recommendations for improving the efficiency and effectiveness of the system. The drugs and medical supplies system is used to procure, store, distribute, and control the use of drugs and medical supplies.

The management system workbook consists mainly of forms. The forms will help you collect information in a standardized way so that it can be systematically reviewed and analyzed. Instructions for using the workbooks are in the Management Analysis Training Module. The module includes exercises to prepare you to use the workbook forms to conduct an analysis of a management support system. Since management procedures vary for each country's health care system, the workbooks fit no one situation perfectly. Before you begin using a workbook you must adapt it to satisfy the special

conditions in your country or region. You may need to:

- Translate the workbook into the local language
- Change the terminology to reflect local usage
- Limit or expand the scope of the analysis
- Omit certain forms or add new ones
- Revise individual forms
- Combine one or more workbooks

You will summarize the results of your analysis in a report that outlines alternative recommendations for improving the system you have studied. This report will become a reference document in the larger process for management development in your country. This process includes workshops that bring together policy level officials and field personnel who are involved in the operation of the system. These persons review the study report and recommend actions to be taken based on the study recommendations. This effort for strengthening the management support for primary health care services parallels other efforts to upgrade the management skills of primary health care workers in the system. In this way, the workers are provided with the skills they need to make the system function effectively and efficiently, and the system is strengthened to respond to the improved capabilities of the workers.

DESCRIPTION OF STUDY METHODS

Information will be gathered by the following methods:

The information gathered will be validated by the following methods:

Findings and conclusions will be formulated by the following methods:

Alternative recommendations will be formulated by the following methods:

SECTION 2

INFORMATION SOURCES AND SCHEDULING OF WORK ACTIVITIES

Form 1: LIST OF PERSONS INTERVIEWED

Use this form to plan your interview schedule and to keep a record of all the interviews that you conduct. Record the date of the interview and the name, title, address, and telephone number of each person interviewed or to be interviewed. This information will be included as an appendix to your written study report.

DATE	NAME	TITLE	ADDRESS	TELEPHONE

Form 2: LIST OF DOCUMENTS REVIEWED

Record the title, author, publisher, and date of publication for every major written document that you review for your study. Also include the date of the review and the source of the document. The information on this form will be included as an appendix to your written study report and will serve as your reference bibliography.

TITLE	AUTHOR	PUBLISHER/ DATE OF PUBLICATION	DATE REVIEWED	SOURCE OR LOCATION

Form 3: SCHEDULE FOR THE MONTH OF _____

Use this form to schedule and plan your work activities. Complete a new form for each month.

[illegible]

SECTION 3

INFORMATION GATHERING

Form 4: WORK FLOW ANALYSIS

This is a general use form for recording and analyzing the flow of work activities. Keep extra copies of this form available to supplement the interview and survey forms that follow.

Activity			
Begins		Ends	
Location		Date	

PRESENT METHOD		PROPOSED METHOD	
Step Number	Action	Step Number	Action

Form 5: INVENTORY OF DRUGS AND MEDICAL SUPPLIES

Use this form to inventory all drugs and medical supplies at selected facilities. List items by generic names, followed by trade name, strength, package size, unit of issue, and code number as appropriate. If an item is out of stock, indicate whether or not it is on order. Check the quantity of each item against the facility's inventory record. Note any discrepancies. Also note procedures for dealing with insufficient or excess stock and with fees charged for supplies. Review drug expiration dates and note any expired drugs.

Facility inspected _____		Location _____		Date _____
_____ Community	_____ Health center	_____ Region	_____ Other _____	
_____ Health post	_____ District	_____ Central Ministry of Health		
Population served _____		Number of service contacts per month _____		

ITEM	UNIT COST	QUANTITY	SOURCE	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

ITEM	UNIT COST	QUANTITY	SOURCE	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 6: PROCEDURES FOR REQUISITIONING, RECEIVING, AND STORING
DRUGS AND MEDICAL SUPPLIES

Use this form to describe procedures for requisitioning, receiving, and storing drugs and medical supplies. Attach copies of existing forms used in ordering, receiving, and dispensing drugs and medical supplies. Use Form 4: Work Flow Analysis, to supplement information recorded, as appropriate.

Person interviewed _____		Title _____	Location _____	Date _____
____ Community	____ Health center	____ Region	____ Other	
____ Health post	____ District	____ Central Ministry of Health		
Population served _____		Number of service contacts per month _____		

REQUISITIONING PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

SUPPLY PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Cold chain:		
Other:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Inspection against shipping documents for quantity and damage:		
Security against leakage or shrinkage:		
Control for expiration dates:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Security of and accountability for narcotics:		
Adequacy of storage facilities and practices:		
Issuing of supplies within the facility:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Issuing of supplies outside the facility:		
Disposal of expired or spoiled supplies:		
Other:		

Form 7: LOCAL PURCHASING PRACTICES

Use this form to describe procedures for purchasing drugs and medical supplies locally. Attach copies of forms and procedures for local purchase.

Person interviewed _____	Title _____	Location _____	Date _____
____ Community	____ Health center	____ Region	____ Other _____
____ Health post	____ District	____ Central Ministry of Health	
Population served _____		Number of service contacts per month _____	

ITEM	UNIT COST	SOURCE OF FUNDS AND METHOD OF PAYMENT	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

ITEM	UNIT COST	SOURCE OF FUNDS AND METHOD OF PAYMENT	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 8: RESOURCES OF THE DRUGS AND MEDICAL SUPPLIES SYSTEM

Use this form to obtain and assess information about the availability and quality of resources to support a drugs and medical supplies system at the health center level and above.

Person interviewed _____		Title _____	Location _____	Date _____
_____ Health center _____ District		_____ Region _____ Central Ministry of Health	_____ Other _____	

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supply specialist personnel:		
Supply clerical personnel:		
Warehouse and storage facilities:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Transportation and distribution capabilities:		
Quality control and audit capabilities:		
Funds for drugs:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Funds for medical supplies other than drugs:		
Funds for drugs and medical supplies management:		
Training in drugs and medical supplies management:		
Other:		

Form 9: PROCEDURES FOR ORDERING AND DISTRIBUTING
DRUGS AND MEDICAL SUPPLIES

Use this form to trace the steps from the source of drugs and medical supplies to final distribution, with emphasis on procedures followed at each step. Study three randomly selected supply items, such as antibiotics, tranquilizers, and tape, for the most recent complete fiscal year. Select items that are reasonably high in volume, used universally, and of value when used or sold outside the primary health care system. Include opening as well as closing stock levels. Use Form 4: Work Flow Analysis, to supplement information recorded, as appropriate.

Person interviewed	Title		Location	Date	Item studied
Community	Health center	Region			
Health post	District	Central Ministry of Health		Other	
Population served	Number of service contacts per month				

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
1.	Opening stock level:			
2.	Order:			
3.	Delivery from central stores:			
4.	Local purchase:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
5.	Inspection against shipping document for quantity and damage:			
6.	Receipt of records:			
7.	Expiration control:			
8.	Redistribution to other locations:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
9.	Closing stock level:			
10.	Return of supplies to ordering source:			
11.	Audit:			
12.	Other:			

Form 10: POLICIES AND ORGANIZATION OF THE DRUGS AND MEDICAL SUPPLIES SYSTEM

Use this form to describe the policies and organization of the drugs and medical supplies system. Attach copies of policy directives, procedures, and organizational charts.

Person interviewed _____	Title _____	Location _____	Date _____
_____ Health center _____ District	_____ Region _____ Central Ministry of Health	_____ Other _____	
Population served _____	Number of service contacts per month _____		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Use of generic equivalencies:		
Use of standardized formularies:		
Procurement:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Prediction of future needs:		
In-country manufacture:		
Laboratory quality control testing:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Pre-packaging in prescription dosages:		
Accountability for quantity control and leakage:		
Use of donated supplies:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Authorized alternative sources, such as local purchase, of supplies:		
Training of health care providers in supply utilization:		
Other:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supervisory chain of command:		
Delegation of authority and accountability:		
Centralization versus decentralization:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other organizations:		
User participation in supply management planning and decision-making:		
Other:		

Form 11: VALIDATION OF FORM _____

Use this form to validate information that you obtain through personal interview. Review the information on the appropriate interview form with persons working at the next higher or next lower organizational levels of the system. Attach this form to the interview form reviewed.

HIGHER ORGANIZATION LEVEL	Person interviewed	Title	Location	Date
Comments:				

LOWER ORGANIZATION LEVEL	Person interviewed	Title	Location	Date
Comments:				

SECTION 4

OBJECTIVES AND FUNCTIONS OF THE DRUGS AND MEDICAL SUPPLIES SYSTEM

Form 12: OBJECTIVES OF THE SYSTEM

Use this form to record the present and proposed objectives of the drugs and medical supplies system. Using the information you have gathered, describe what the system is now doing and what it should do in the future to adequately support the delivery of primary health care services.

Present objectives:	
Proposed objectives:	

Form 13: FUNCTIONS OF THE SYSTEM

Use this form as an organizational responsibility chart to help define the scope of the drugs and medical supplies system. In the first column, record all of the functions of the system that you have identified. In the succeeding columns, indicate which aspect of each function is performed by the various organizational levels of the system. Use the following symbols to note the type of responsibility assumed for each function:

- P -- Prepares or reviews an action
- R -- Recommends an action
- A -- Approves an action
- E -- Executes an action
- M -- Monitors an action

FUNCTIONS	COMMUNITY LEVEL	HEALTH POST LEVEL	HEALTH CENTER LEVEL	DISTRICT LEVEL	REGIONAL LEVEL	CENTRAL MINISTRY OF HEALTH LEVEL	OTHER CENTRAL LEVEL

SECTION 5

SUMMARY OF FINDINGS AND CONCLUSIONS

Using Forms 14 to 19

Use Forms 14 to 19 to summarize the information that you have recorded on Forms 5 to 10. Notice that Forms 14 to 19 are similar in format to Forms 5 to 10. This will ease your work in summarizing the information. Use as many extra pages as you need.

Prepare a summary form for each organizational level of the primary health care system. For example, if you gathered information on Form 5 from each of the following organizational levels, you would then prepare six different versions of the same summary form, one for each organizational level:

- Community
- Health post
- Health center
- District
- Central ministry of health
- Other central agency

Form 14: SUMMARY OF FORM 5—INVENTORY OF DRUGS AND MEDICAL SUPPLIES

<div><div>Community</div><div>Health post</div></div> <div><div>Health center</div><div>District</div></div> <div><div>Region</div><div>Central Ministry of Health</div></div> <div><div>Other</div></div>			
ITEM	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT	

Form 15: SUMMARY OF FORM 6—PROCEDURES FOR REQUISITIONING, RECEIVING,
AND STORING DRUGS AND MEDICAL SUPPLIES

<div><div><div>Community</div><div>Health post</div></div><div><div>Health center</div><div>District</div></div><div><div>Region</div><div>Central Ministry of Health</div></div><div><div>Other</div></div></div>		
REQUISITIONING PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

SUPPLY PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Cold chain:		
Other:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Inspection against shipping documents for quantity and damage:		
Security against leakage or shrinkage:		
Control for expiration dates:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Security of and accountability for narcotics:		
Adequacy of storage facilities and practices:		
Issuing of supplies within the facility:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Issuing of supplies outside the facility:		
Disposal of expired or spoiled supplies:		
Other:		

Form 16: SUMMARY OF FORM 7—LOCAL PURCHASING PRACTICES

<input type="checkbox"/> Community	<input type="checkbox"/> Health center	<input type="checkbox"/> Region	<input type="checkbox"/> Other
<input type="checkbox"/> Health post	<input type="checkbox"/> District	<input type="checkbox"/> Central Ministry of Health	

ITEM	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 17: SUMMARY OF FORM 8—RESOURCES OF THE DRUGS AND
MEDICAL SUPPLIES SYSTEM

Health center District	Region Central Ministry of Health	Other
---------------------------	--------------------------------------	-------

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supply specialist personnel:		
Supply clerical personnel:		
Warehouse and storage facilities:		

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RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
<p>Transportation and distribution capabilities:</p>		
<p>Quality control and audit capabilities:</p>		
<p>Funds for drugs:</p>		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Funds for medical supplies other than drugs:		
Funds for drugs and medical supplies management:		
Training in drugs and medical supplies management:		
Other:		

Form 18: SUMMARY OF FORM 9—PROCEDURES FOR ORDERING AND
DISTRIBUTING DRUGS AND MEDICAL SUPPLIES

___ Community	___ Health center	___ Region	___ Other
___ Health post	___ District	___ Central Ministry of Health	

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
1.	Opening stock level:			
2.	Order:			
3.	Delivery from central stores:			
4.	Local purchase:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
5.	Inspection against shipping document for quantity and damage:			
6.	Receipt of records:			
7.	Expiration control:			
8.	Redistribution to other locations:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
9.	Closing stock level:			
10.	Return of supplies to ordering source:			
11.	Audit:			
12.	Other:			

Form 19: SUMMARY OF FORM 10—POLICIES AND ORGANIZATION OF THE
DRUGS AND MEDICAL SUPPLIES SYSTEM

Health center District	Region Central Ministry of Health	Other
---------------------------	--------------------------------------	-------

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Use of generic equivalencies:		
Use of standardized formularies:		
Procurement:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Prediction of future needs:		
In-country manufacture:		
Laboratory quality control testing:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Pre-packaging in prescription dosages:		
Accountability for quantity control and leakage:		
Use of donated supplies:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Authorized alternative sources, such as local purchase, of supplies:		
Training of health care providers in supply utilization:		
Other:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supervisory chain of command:		
Delegation of authority and accountability:		
Centralization versus decentralization:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other organizations:		
User participation in supply management planning and decision-making:		
Other:		

Form 20: SUMMARY OF FINDINGS AND CONCLUSIONS

Use this form to describe the issues and problems that you have identified in your study. Summarize each issue or problem in the "Findings" column. Assign each conclusion a reference number to link it to the alternative recommendations to be described in Form 24.

<div><div>Community</div><div>Health post</div></div> <div><div>Health center</div><div>District</div></div> <div><div>Region</div><div>Central Ministry of Health</div></div> <div><div>Other</div></div>		
FINDINGS	CONCLUSIONS	REFERENCE NUMBER

FINDINGS	CONCLUSIONS	REFERENCE NUMBER

SECTION 6

PROBLEM-SOLVING

Form 21: STATEMENT OF PROBLEM AND ROOT CAUSES

This is the first of three forms used in the step-by-step problem-solving approach to analyzing and developing solutions to management problems. Use this form to state each problem that you identify and its root causes. The completed form will be the basis for further analysis.

STATEMENT OF THE PROBLEM	
What is the problem?	
When and how often does it occur?	
How does the problem affect health management?	
How severe is the impact?	
Where does the problem occur?	
Who is affected by the problem?	
Who is responsible for the work activity where the problem occurs?	
ROOT CAUSE(S) OF THE PROBLEM	
1.	
2.	
3.	

Form 22: ANALYSIS OF FORCES AFFECTING CHANGE

This is the second form in the problem-solving approach to solving management problems. Use this form to identify factors that either constrain actions toward reaching a solution or help in reaching a solution. The completed form will be the basis for further analysis.

CONSTRAINING FORCES	HELPING FORCES

Form 23: ALTERNATIVE PROBLEM-SOLVING APPROACHES

This is the third of three forms in the problem-solving approach to solving management problems. Use this form to identify and examine alternative approaches to solving the problems that you have identified. This completed form becomes a reference for developing your final recommendations.

APPROACH	ADVANTAGES	DISADVANTAGES

SECTION 7

ALTERNATIVE RECOMMENDATIONS

Form 24: ALTERNATIVE RECOMMENDATIONS FOR CONCLUSION

Complete one copy of this form for each study conclusion that you described on Form 20. For each conclusion develop a minimum of two alternative recommendations, with accompanying justification statements. Rank the recommendations according to priority, with the most desirable listed first. Use as many extra pages as you need. You will submit these recommendations to others in the group decision-making process for management systems improvement.

RECOMMENDATIONS	JUSTIFICATIONS
1.	
2.	
3.	

GENERAL SUPPLIES SYSTEM WORKBOOK

The MEDEX Primary Health Care Series

GENERAL SUPPLIES SYSTEM WORKBOOK

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Health Manpower Development Staff

John A. Burns School of Medicine

University of Hawaii, Honolulu, Hawaii, U.S.A.

Prepared for _____

Prepared by _____

Date completed _____

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SECTION 1

INTRODUCTION

USING THE MANAGEMENT SYSTEM WORKBOOK

This is one of eight workbooks in a series designed to guide you in analyzing the management systems needed to support the delivery of primary health care services. The eight management support systems are:

- Drugs and Medical Supplies
- General Supplies
- Facilities and Equipment Maintenance
- Transportation
- Communication
- Personnel
- Finance
- Health Information

This workbook will help you conduct a comprehensive study of the general supplies system leading to recommendations for improving the efficiency and effectiveness of the system. The general supplies system is used to procure, store, distribute, and control the use of administrative, office, and other supplies and equipment.

The management system workbook consists mainly of forms. The forms will help you collect information in a standardized way so that it can be systematically reviewed and analyzed. Instructions for using the workbook are in the Management Analysis Training Module. The module includes exercises to prepare you to use the workbook forms to conduct an analysis of a management support system. Since the management procedures vary for each country's health care system, the workbooks fit no one situation perfectly.

Before you begin using a workbook you must adapt it to satisfy the special conditions in your country or region. You may need to:

- Translate the workbook into the local language
- Change the terminology to reflect local usage
- Limit or expand the scope of the analysis
- Omit certain forms or add new ones
- Revise individual forms
- Combine one or more workbooks

You will summarize the results of your analysis in a report that outlines alternative recommendations for improving the system you have studied. This report will become a reference document in the larger process for management development in your country. This process includes workshops that bring together policy level officials and field personnel who are involved in the operation of the system. These persons review the study report and recommend actions to be taken based on the study recommendations. This effort for strengthening the management support for primary health care services parallels other efforts to upgrade the management skills of primary health care workers in the system. In this way, the workers are provided with the skills they need to make the system function effectively and efficiently, and the system is strengthened to respond to the improved capabilities of the workers.

DESCRIPTION OF STUDY METHODS

Information will be gathered by the following methods:

The information gathered will be validated by the following methods:

Findings and conclusions will be formulated by the following methods:

Alternative recommendations will be formulated by the following methods:

SECTION 2

**INFORMATION SOURCES AND
SCHEDULING OF WORK ACTIVITIES**

Form 1: LIST OF PERSONS INTERVIEWED

Use this form to plan your interview schedule and to keep a record of all the interviews that you conduct. Record the date of the interview and the name, title, address, and telephone number of each person interviewed or to be interviewed. This information will be included as an appendix to your written study report.

DATE	NAME	TITLE	ADDRESS	TELEPHONE

Form 2: LIST OF DOCUMENTS REVIEWED

Record the title, author, publisher, and date of publication for every major written document that you review for your study. Also include the date of the review and the source of the document. The information on this form will be included as an appendix to your written study report and will serve as your reference bibliography.

TITLE	AUTHOR	PUBLISHER/ DATE OF PUBLICATION	DATE REVIEWED	SOURCE OR LOCATION

Form 3: SCHEDULE FOR THE MONTH OF _____

Use this form to schedule and plan your work activities. Complete a new form for each month.

[illegible]

SECTION 3

INFORMATION GATHERING

Form 4: WORK FLOW ANALYSIS

This is a general use form for recording and analyzing the flow of work activities. Keep extra copies of this form available to supplement the interview and survey forms that follow.

Activity			
Begins		Ends	
Location		Date	

PRESENT METHOD		PROPOSED METHOD	
Step Number	Action	Step Number	Action

Form 5: INVENTORY OF GENERAL SUPPLIES

Use this form to inventory all general supplies at selected facilities. List items by commonly used names, followed by trade name, package size, unit of issue, and code number, as appropriate. If an item is out of stock, indicate whether or not it is on order. Check the quantity of each item against the facility's inventory record. Note any discrepancies. Also note procedures for dealing with insufficient or excess stock and with fees charged for supplies.

Facility inspected _____		Location _____	
Person interviewed _____		Title _____	Date _____
____ Community	____ Health center	____ Region	____ Other _____
____ Health post	____ District	____ Central Ministry of Health	
Population served _____		Number of service contacts per month _____	

ITEM	UNIT COST	QUANTITY	SOURCE	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

ITEM	UNIT COST	QUANTITY	SOURCE	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 6: PROCEDURES FOR REQUISITIONING, RECEIVING, AND STORING GENERAL SUPPLIES

Use this form to describe procedures for requisitioning, receiving, and storing general supplies. Attach copies of existing forms used in ordering, receiving, storing, and dispensing supplies. Use Form 4: Work Flow Analysis, to supplement information recorded, as appropriate.

Person interviewed _____		Title _____	Location _____	Date _____
Community _____		Health center _____	Region _____	Other _____
Health post _____		District _____	Central Ministry of Health _____	
Population served _____			Number of service contacts per month _____	

SUPPLY PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Inventory control:		
Ordering and requisitioning:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Inspection against shipping documents for quantity and damage:		
Security against leakage or shrinkage:		
Security against spoilage:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Issuing of supplies inside and outside the facility:		
Adequacy of storage facilities and practices:		
Other:		

Form 7: LOCAL PURCHASING PRACTICES

Use this form to describe procedures for purchasing general supplies locally. Attach copies of forms and procedures for local purchases.

Person interviewed _____		Title _____		Location _____		Date _____	
____ Community		____ Health center		____ Region		____ Other _____	
____ Health post		____ District		____ Central Ministry of Health		_____	
Population served _____		_____		Number of service contacts per month _____		_____	

ITEM	UNIT COST	SOURCE OF FUNDS AND METHOD OF PAYMENT	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

ITEM	UNIT COST	SOURCE OF FUNDS AND METHOD OF PAYMENT	PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 8: RESOURCES OF THE GENERAL SUPPLIES SYSTEM

Use this form to obtain and assess information about the availability and quality of resources to support a general supplies system at the health center level and above.

Person interviewed _____	Title _____	Location _____	Date _____
_____ Health center	_____ Region	_____ Other _____	
_____ District	_____ Central Ministry of Health		
Population served _____	Number of service contacts per month _____		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENTS
Supply specialist personnel:		
Supply clerical personnel:		
Warehouse and storage facilities:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Transportation and distribution capabilities:		
Quality control and audit capabilities:		
Funds for general supplies:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Funds for general supplies management:		
Training in general supplies management:		
Other:		

Form 9: PROCEDURES FOR ORDERING AND DISTRIBUTING GENERAL SUPPLIES

Use this form to trace the steps from the source of supplies to final distribution, with emphasis on procedures followed at each step. Study three randomly selected supply items, such as fuel, cleaning supplies, and commonly used office supplies, for the most recent complete fiscal year. Select items that are reasonably high in volume, used universally, and of value when used or sold outside the primary health care system. Include opening as well as closing stock levels.

Person interviewed _____	Title _____	Location _____	Date _____	Item studied _____
____ Community	____ Health center	____ Region	____ Other _____	
____ Health post	____ District	____ Central Ministry of Health	_____	
Population served _____	Number of service contacts per month _____			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
1.	Opening stock level:			
2.	Order:			
3.	Delivery from central stores:			
4.	Local purchase:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
5.	Inspection against shipping document for quantity and damage:			
6.	Receipt of records:			
7.	Spoilage control:			
8.	Redistribution to other locations:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
9.	Closing stock level:			
10.	Return of supplies to ordering source:			
11.	Audit:			
12.	Other:			

Form 10: POLICIES AND ORGANIZATION OF THE GENERAL SUPPLIES SYSTEM

Use this form to describe the policies and organization of the general supplies system. Attach copies of policy directives, procedures, and organizational charts.

Person interviewed _____	Title _____	Location _____	Date _____
_____ Health center _____ District	_____ Region _____ Central Ministry of Health	_____ Other _____	
Population served _____	Number of service contacts per month _____		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Use of standardized supply lists:		
Inventory control:		
Requirements for accountability:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Prediction of future needs:		
In-country manufacture versus importation:		
Use of donated supplies:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Authorized alternative sources of supplies:		
Training of health care providers in supply utilization:		
Other:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supervisory chain of command:		
Delegation of authority and accountability:		
Centralization versus decentralization:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other organizations:		
User participation in supply management planning and decision-making:		
Other:		

SECTION 4

OBJECTIVES AND FUNCTIONS OF THE GENERAL SUPPLIES SYSTEM

Form 12: OBJECTIVES OF THE SYSTEM

Use this form to record the present and proposed objectives of the general supplies system. Using the information you have gathered, describe what the system is now doing and what it should do in the future to adequately support the delivery of primary health care services.

Present objectives:	
Proposed objectives:	

Form 13: FUNCTIONS OF THE SYSTEM

Use this form as an organizational chart to help define the scope of the general supplies system. In the first column, record all of the functions of the system that you have identified. In the succeeding columns, indicate which aspect of each function is performed by the various organizational levels of the system. Use the following symbols to note the type of responsibility assumed for each function:

- P -- Prepares or reviews an action
- R -- Recommends an action
- A -- Approves an action
- E -- Executes an action
- M -- Monitors an action

FUNCTION	COMMUNITY LEVEL	HEALTH POST LEVEL	HEALTH CENTER LEVEL	DISTRICT LEVEL	REGIONAL LEVEL	CENTRAL MINISTRY OF HEALTH LEVEL	OTHER CENTRAL LEVEL

SECTION 5

SUMMARY OF FINDINGS AND CONCLUSIONS

Using Forms 14 to 19

Use Forms 14 to 19 to summarize the information that you have recorded on Forms 5 to 10. Notice that Forms 14 to 19 are similar in format to Forms 5 to 10. This will ease your work in summarizing the information. Use as many extra pages as you need.

Prepare a summary form for each organizational level of the primary health care system. For example, if you gathered information on Form 5 from each of the following organizational levels, you would then prepare six different versions of the same summary form, one for each organizational level:

- Community
- Health post
- Health center
- District
- Central ministry of health
- Other central agency

Form 14: SUMMARY OF FORM 5—INVENTORY OF GENERAL SUPPLIES

<div><div>Community</div><div>Health post</div></div> <div><div>Health center</div><div>District</div></div> <div><div>Region</div><div>Central Ministry of Health</div></div> <div><div>Other</div></div>		
ITEM	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 15: SUMMARY OF FORM 6—PROCEDURES FOR REQUISITIONING, RECEIVING,
AND STORING GENERAL SUPPLIES

___ Community	___ Health center	___ Region	___ Other
___ Health post	___ District	___ Central Ministry of Health	

SUPPLY PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Inventory control:		
Ordering and requisitioning:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Inspection against shipping documents for quantity and damage:		
Security against leakage or shrinkage:		
Security against spoilage:		

STOCK CONTROL PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Issuing of supplies inside and outside the facility:		
Adequacy of storage facilities and practices:		
Other:		

Form 16: SUMMARY OF FORM 7—LOCAL PURCHASING PRACTICES

<input type="checkbox"/> Community	<input type="checkbox"/> Health center	<input type="checkbox"/> Region	<input type="checkbox"/> Other
<input type="checkbox"/> Health post	<input type="checkbox"/> District	<input type="checkbox"/> Central Ministry of Health	

ITEM	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 17: SUMMARY OF FORM 8—RESOURCES OF THE GENERAL SUPPLIES SYSTEM

Health center District	Region Central Ministry of Health	Other
---------------------------	--------------------------------------	-------

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supply specialist personnel:		
Supply clerical personnel:		
Warehouse and storage facilities:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Transportation and distribution capabilities:		
Quality control and audit capabilities:		
Funds for general supplies:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Funds for general supplies management:		
Training in general supplies management:		
Other:		

Form 18: SUMMARY OF FORM 9—PROCEDURES FOR ORDERING
AND DISTRIBUTING GENERAL SUPPLIES

Community	Health center	Region	Other
Health post	District	Central Ministry of Health	

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
1.	Opening stock level:			
2.	Order:			
3.	Delivery from central stores:			
4.	Local purchase:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
5.	Inspection against shipping document for quantity and damage:			
6.	Receipt of records:			
7.	Spoilage control:			
8.	Redistribution to other locations:			

STEP	PROCEDURE	DATE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
9.	Closing stock level:			
10.	Return of supplies to ordering source:			
11.	Audit:			
12.	Other:			

Form 19: SUMMARY OF FORM 10—POLICIES AND ORGANIZATION
OF THE GENERAL SUPPLIES SYSTEM

Health center District	Region Central Ministry of Health	Other
---------------------------	--------------------------------------	-------

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Use of standardized supply lists:		
Inventory control:		
Requirements for accountability:		

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POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Prediction of future needs:		
In-country manufacture versus importation:		
Use of donated supplies:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Authorized alternative sources of supplies:		
Training of health care providers in supply utilization:		
Other:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supervisory chain of command:		
Delegation of authority and accountability:		
Centralization versus decentralization:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other organizations:		
User participation in supply management planning and decision-making:		
Other:		

Form 20: SUMMARY OF FINDINGS AND CONCLUSIONS

Use this form to describe the issues and problems that you have identified in your study. Summarize each issue or problem in the "Findings" column. Assign each conclusion a reference number to link it to the alternative recommendations to be described in Form 24.

<div><div><div>Community</div><div>Health post</div></div><div><div>Health center</div><div>District</div></div><div><div>Region</div><div>Central Ministry of Health</div></div><div><div>Other</div></div></div>			
FINDINGS	CONCLUSIONS	REFERENCE NUMBER	

FINDINGS	CONCLUSIONS	REFERENCE NUMBER

SECTION 6

PROBLEM-SOLVING

Form 21: STATEMENT OF PROBLEM AND ROOT CAUSES

This is the first of three forms used in the step-by-step problem-solving approach to analyzing and developing solutions to management problems. Use this form to state each problem that you identify and its root causes. The completed form will be the basis for further analysis.

STATEMENT OF THE PROBLEM	
What is the problem?	
When and how often does it occur?	
How does the problem affect health management?	
How severe is the impact?	
Where does the problem occur?	
Who is affected by the problem?	
Who is responsible for the work activity where the problem occurs?	
ROOT CAUSE(S) OF THE PROBLEM	
1.	
2.	
3.	

Form 22: ANALYSIS OF FORCES AFFECTING CHANGE

This is the second form in the problem-solving approach to solving management problems. Use this form to identify factors that either constrain actions toward reaching a solution or help in reaching a solution. The completed form will be the basis for further analysis.

CONSTRAINING FORCES	HELPING FORCES

Form 23: ALTERNATIVE PROBLEM-SOLVING APPROACHES

This is the third of three forms in the problem-solving approach to solving management problems. Use this form to identify and examine alternative approaches to solving the problems that you have identified. This completed form becomes a reference for developing your final recommendations.

APPROACH	ADVANTAGES	DISADVANTAGES

SECTION 7

ALTERNATIVE RECOMMENDATIONS

Form 24: ALTERNATIVE RECOMMENDATIONS FOR CONCLUSION _____

Complete one copy of this form for each study conclusion that you described on Form 20. For each conclusion develop a minimum of two alternative recommendations, with accompanying justification statements. Rank the recommendations according to priority, with the most desirable listed first. Use as many extra pages as you need. You will submit these recommendations to others in the group decision-making process for management systems improvement.

RECOMMENDATIONS	JUSTIFICATIONS
1.	
2.	
3.	

**FACILITIES AND EQUIPMENT MAINTENANCE
SYSTEM WORKBOOK**

The MEDEX Primary Health Care Series

FACILITIES AND EQUIPMENT MAINTENANCE SYSTEM WORKBOOK

©1983

Health Manpower Development Staff

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University of Hawaii, Honolulu, Hawaii, U.S.A.

Prepared for _____

Prepared by _____

Date completed _____

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Ordering List for Workbook Forms

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Form 2: LIST OF DOCUMENTS REVIEWED	—	Form 13: SUMMARY OF FORM 5	—
Form 3: SCHEDULE FOR THE MONTH OF —	—	Form 14: SUMMARY OF FORM 6	—
Form 4: WORK FLOW ANALYSIS	—	Form 15: SUMMARY OF FORM 7	—
Form 5: PRIMARY HEALTH CARE FACILITIES AND EQUIPMENT	—	Form 16: SUMMARY OF FORM 8	—
Form 6: MAINTENANCE AND REPAIR PROCEDURES	—	Form 17: SUMMARY OF FORM 9	—
Form 7: MAINTENANCE AND REPAIR RESOURCES	—	Form 18: SUMMARY OF FINDINGS AND CONCLUSIONS	—
Form 8: MAINTENANCE AND REPAIR EQUIPMENT	—	Form 19: STATEMENT OF PROBLEM AND ROOT CAUSES	—
Form 9: POLICIES AND ORGANIZATION OF THE FACILITIES AND EQUIPMENT MAINTENANCE SYSTEM	—	Form 20: ANALYSIS OF FORCES AFFECTING CHANGE	—
Form 10: VALIDATION OF FORM —	—	Form 21: ALTERNATIVE PROBLEM-SOLVING APPROACHES	—
Form 11: OBJECTIVES OF THE SYSTEM	—	Form 22: ALTERNATIVE RECOMMENDATIONS FOR CONCLUSION —	—

SECTION 1

INTRODUCTION

USING THE MANAGEMENT SYSTEM WORKBOOK

This is one of eight workbooks in a series designed to guide you in analyzing the management systems needed to support the delivery of primary health care services. The eight management support systems are:

- | | |
|--------------------------------------|--------------------|
| Drugs and Medical Supplies | Communication |
| General Supplies | Personnel |
| Facilities and Equipment Maintenance | Finance |
| Transportation | Health Information |

This workbook will help you conduct a comprehensive study of the facilities and equipment maintenance system leading to recommendations for improving the efficiency and effectiveness of the system. The facilities and equipment maintenance system is used to protect facilities and equipment from deterioration and to help prolong their useful life through preventive maintenance and repair.

The management system workbook consists mainly of forms. The forms will help you collect information in a standardized way so that it can be systematically reviewed and analyzed. Instructions for using the workbook are in the Management Analysis Training Module. The module includes exercises to prepare you to use the workbook forms to conduct an analysis of a management support system. Since the management procedures vary for each country's health care system, the workbooks fit no one situation perfectly.

Before you begin using a workbook you must adapt it to satisfy the special conditions in your country or region. You may need to:

- Translate the workbook into the local language
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- Limit or expand the scope of the analysis
- Omit certain forms or add new ones
- Revise individual forms
- Combine one or more workbooks

You will summarize the results of your analysis in a report that outlines alternative recommendations for improving the system you have studied. This report will become a reference document in the larger process for management development in your country. This process includes workshops that bring together policy level officials and field personnel who are involved in the operation of the system. These persons review the study report and recommend actions to be taken based on the study recommendations. This effort for strengthening the management support for primary health care services parallels other efforts to upgrade the management skills of primary health care workers in the system. In this way, the workers are provided with the skills they need to make the system function effectively and efficiently, and the system is strengthened to respond to the improved capabilities of the workers.

DESCRIPTION OF STUDY METHODS

Information will be gathered by the following methods:

The information gathered will be validated by the following methods:

Findings and conclusions will be formulated by the following methods:

Alternative recommendations will be formulated by the following methods:

SECTION 2

**INFORMATION SOURCES AND
SCHEDULING OF WORK ACTIVITIES**

Form 1: LIST OF PERSONS INTERVIEWED

Use this form to plan your interview schedule and to keep a record of all the interviews that you conduct. Record the date of the interview and the name, title, address, and telephone number of each person interviewed or to be interviewed. This information will be included as an appendix to your written study report.

DATE	NAME	TITLE	ADDRESS	TELEPHONE

Form 2: LIST OF DOCUMENTS REVIEWED

Record the title, author, publisher, and date of publication for every major written document that you review for your study. Also include the date of the review and the source of the document. The information on this form will be included as an appendix to your written study report and will serve as your reference bibliography.

TITLE	AUTHOR	PUBLISHER/ DATE OF PUBLICATION	DATE REVIEWED	SOURCE OR LOCATION

Form 3: SCHEDULE FOR THE MONTH OF _____

Use this form to schedule and plan your work activities. Complete a new form for each month.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

SECTION 3

INFORMATION GATHERING

Form 4: WORK FLOW ANALYSIS

This is a general use form for recording and analyzing the flow of work activities. Keep extra copies of this form available to supplement the interview and survey forms that follow.

Activity			
Begins		Ends	
Location		Date	

PRESENT METHOD		PROPOSED METHOD	
Step Number	Action	Step Number	Action

Form 5: PRIMARY HEALTH CARE FACILITIES AND EQUIPMENT

This form will help you conduct an inventory of primary health care facilities and equipment. The person in charge of the facility should accompany you as you inspect and inventory the facilities and equipment. Survey each building room-by-room. Assess the condition of each item using the following scale:

- 1 -- Excellent
- 2 -- Good
- 3 -- Fair
- 4 -- Poor
- 5 -- Needs repair before further use
- 6 -- Needs to be replaced

Whenever an item needs better maintenance or repair, obtain an estimate of how long it has been in its present condition.

Facility inspected _____	Location _____
Person interviewed _____	Title _____ Location _____ Date _____
____ Community _____ Health center _____ Region _____ Other _____	
____ Health post _____ District _____ Central Ministry of Health _____	
Population served _____	Number of service contacts per month _____
1. Who owns your facility?	
2. Who originally provided your facility?	
3. Who is responsible for facility maintenance and repair?	

4. What are the main problems with the facility?	
5. Who provided your equipment?	
6. Who is responsible for equipment maintenance and repair?	
7. Do you have any problems with equipment maintenance and repair?	
8. Do you have any additional comments?	

Inventory of Grounds, Facilities, and Equipment			
ITEM		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Description	Condition		

Form 6: MAINTENANCE AND REPAIR PROCEDURES

Use this form to describe procedures for obtaining and providing preventive maintenance and repairs. Interview the person or persons responsible for initiating preventive maintenance efforts. Attach to this form copies of printed procedures for preventive maintenance and repairs. Use Form 4: Work Flow Analysis, to describe the flow of preventive maintenance and repair request documents and other paper work, as appropriate.

Person interviewed _____		Title _____	Location _____	Date _____
____ Community	____ Health center	____ Region	____ Other	
____ Health post	____ District	____ Central Ministry of Health		
Population served _____		Number of service contacts per month _____		

Facility		
MAINTENANCE AND REPAIR PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Equipment		
MAINTENANCE AND REPAIR PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Maintenance and repair services in order of frequency requested							
RANK	TYPE OF SERVICE	TIMES PER MONTH		RANK	TYPE OF SERVICE	TIMES PER MONTH	
		REQUESTED	DONE			REQUESTED	DONE
1.				11.			
2.				12.			
3.				13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Form 7: MAINTENANCE AND REPAIR RESOURCES

Use this form to obtain and assess information about the availability and quality of resources to support a primary health care preventive maintenance and repair system.

Person interviewed _____		Title _____	Location _____	Date _____
____ Community		Health center	Region	Other _____
____ Health post		District	Central Ministry of Health	
Population served _____			Number of service contacts per month _____	

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Maintenance and repair personnel:		
Skills of maintenance and repair personnel:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Adequacy of working conditions for maintenance and repair personnel:		
Tools of maintenance and repair personnel:		
Transportation of maintenance and repair personnel:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Morale of maintenance and repair personnel:		
Buildings and facilities for repair services:		
Equipment for repair services:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Availability of spare parts:		
Maintenance and repair supplies:		
Funds for maintenance and repairs:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Other:		

Form 8: MAINTENANCE AND REPAIR EQUIPMENT

Use this form to describe existing equipment used for maintenance and repair purposes at various levels of the primary health care system. Assess the condition of each item using the following scale:

- 1 -- Excellent
- 2 -- Good
- 3 -- Fair
- 4 -- Poor
- 5 -- Needs repair before further use
- 6 -- Needs to be replaced

Person interviewed _____		Title _____	Location _____	Date _____
____ Community	____ Health center	____ Region	____ Other	
____ Health post	____ District	____ Central Ministry of Health		
Population served _____		Number of service contacts per month _____		

ITEM		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Description	Condition		

ITEM		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Description	Condition		

Form 9: POLICIES AND ORGANIZATION OF THE FACILITIES AND EQUIPMENT MAINTENANCE SYSTEM

Use this form to describe the policies and organization of the facilities and equipment maintenance system. Attach copies of policy directives, procedures, and organizational charts.

Person interviewed _____		Title _____	Location _____	Date _____
_____ Health center _____ District		_____ Region _____ Central Ministry of Health	_____ Other _____	
Population served _____ Number of service contacts per month _____				
POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT		
Responsibility for ministry of health preventive maintenance program for primary health care facilities:				
Responsibility for ministry of health preventive maintenance program for primary health care equipment:				
Responsibility for repair of inoperable equipment:				

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Responsibility for day-to-day maintenance of primary health care facilities:		
Responsibility for day-to-day maintenance of primary health care equipment:		
Responsibility for preventive maintenance logs:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Quality control inspections and audits:		
Delegation of accountability and authority:		
Centralization versus decentralization:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other ministries or agencies:		
Relationships with private sector:		
Other:		

Form 10: VALIDATION OF FORM _____

Use this form to validate information that you obtain through personal interview. Review the information on the appropriate interview form with persons working at the next higher or next lower organizational levels of the system. Attach this form to the interview form reviewed.

HIGHER ORGANIZATION LEVEL	Person interviewed	Title	Location	Date
Comments:				
LOWER ORGANIZATION LEVEL	Person interviewed	Title	Location	Date
Comments:				

SECTION 4

**OBJECTIVES AND FUNCTIONS OF THE
FACILITIES AND EQUIPMENT MAINTENANCE
SYSTEM**

Form 11: OBJECTIVES OF THE SYSTEM

Use this form to record the present and proposed objectives of the facilities and equipment maintenance system. Using the information you have gathered, describe what the system is now doing and what it should do in the future to adequately support the delivery of primary health care services.

<p>Present objectives:</p>	<p>Proposed objectives:</p>
----------------------------	-----------------------------

Form 12: FUNCTIONS OF THE SYSTEM

Use this form as an organizational responsibility chart to help define the scope of the facilities and equipment maintenance system. In the first column, record all of the functions of the system that you have identified. In the succeeding columns, indicate which aspect of each function is performed by the various organizational levels of the system. Use the following symbols to note the type of responsibility for each function:

- P -- Prepares or reviews an action
- R -- Recommends an action
- A -- Approves an action
- E -- Executes an action
- M -- Monitors an action

FUNCTIONS	COMMUNITY LEVEL	HEALTH POST LEVEL	HEALTH CENTER LEVEL	DISTRICT LEVEL	REGIONAL LEVEL	CENTRAL MINISTRY OF HEALTH LEVEL	OTHER CENTRAL LEVEL

SECTION 5

SUMMARY OF FINDINGS AND CONCLUSIONS

Using Forms 13 to 17

Use Forms 13 to 17 to summarize the information that you have recorded on Forms 5 to 9. Notice that Forms 13 to 17 are similar in format to Forms 5 to 9. This will ease your work in summarizing the information. Use as many extra pages as you need.

Prepare a summary form for each organizational level of the primary health care system. For example, if you gathered information on Form 5 from each of the following organizational levels, you would then prepare six different versions of the same summary form, one for each organizational level:

- Community
- Health post
- Health center
- District
- Central ministry of health
- Other central agency

Form 13: SUMMARY OF FORM 5—PRIMARY HEALTH CARE FACILITIES AND EQUIPMENT

___ Community	___ Health center	___ Region	___ Other
___ Health post	___ District	___ Central Ministry of Health	

1. Who owns your facility?
2. Who originally provided your facility?
3. Who is responsible for facility maintenance and repair?

4. What are the main problems with the facility?	
5. Who provided your equipment?	
6. Who is responsible for equipment maintenance and repair?	
7. Do you have any problems with equipment maintenance and repair?	
8. Do you have any additional comments?	

Inventory of Grounds, Facilities, and Equipment

ITEM		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Description	Condition		

Form 14: SUMMARY OF FORM 6—MAINTENANCE AND REPAIR PROCEDURES

<input type="checkbox"/> Community	<input type="checkbox"/> Health center	<input type="checkbox"/> Region	<input type="checkbox"/> Other
<input type="checkbox"/> Health post	<input type="checkbox"/> District	<input type="checkbox"/> Central Ministry of Health	

Facility		
MAINTENANCE AND REPAIR PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Equipment			
MAINTENANCE AND REPAIR PROCEDURES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT	

Maintenance and repair services in order of frequency requested							
RANK	TYPE OF SERVICE	TIMES PER MONTH		RANK	TYPE OF SERVICE	TIMES PER MONTH	
		REQUESTED	DONE			REQUESTED	DONE
1.				11.			
2.				12.			
3.				13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Form 15: SUMMARY OF FORM 7—MAINTENANCE AND REPAIR RESOURCES

<div>___ Community ___ Health center ___ Region ___ Other ___ Health post ___ District ___ Central Ministry of Health</div>			
RESOURCES		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Maintenance and repair personnel:			
Skills of maintenance and repair personnel:			

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Adequacy of working conditions for maintenance and repair personnel:		
Tools of maintenance and repair personnel:		
Transportation of maintenance and repair personnel:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Morale of maintenance and repair personnel:		
Buildings and facilities for repair services:		
Equipment for repair services:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Availability of spare parts:		
Maintenance and repair supplies:		
Funds for maintenance and repairs:		

RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
other:		

___ Community	___ Health center	___ Region	___ Other
___ Health post	___ District	___ Central Ministry of Health	

ITEM		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Description	Condition		

ITEM		ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Description	Condition		

Form 17: SUMMARY OF FORM 9—POLICIES AND ORGANIZATION OF
THE FACILITIES AND EQUIPMENT MAINTENANCE SYSTEM

<div> <div>Health center</div> <div>District</div> </div>	<div> <div>Region</div> <div>Central Ministry of Health</div> </div>	<div> <div>Other</div> </div>
-----------------------------------------------------------	----------------------------------------------------------------------	-------------------------------

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Responsibility for ministry of health preventive maintenance program for primary health care facilities:		
Responsibility for ministry of health preventive maintenance program for primary health care equipment:		
Responsibility for repair of inoperable equipment:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Responsibility for day-to-day maintenance of primary health care facilities:		
Responsibility for day-to-day maintenance of primary health care equipment:		
Responsibility for preventive maintenance logs:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Quality control inspections and audits:		
Delegation of accountability and authority:		
Centralization versus decentralization:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other ministries or agencies:		
Relationships with private sector:		
Other:		

Use this form to describe the issues and problems that you have identified in your study. Summarize each issue or problem in the "Findings" column. Assign each conclusion a reference number to link it to the alternative recommendations to be described in Form 22.

<div><div>Community</div><div>Health post</div></div> <div><div>Health center</div><div>District</div></div> <div><div>Region</div><div>Central Ministry of Health</div></div> <div><div>Other</div></div>		
FINDINGS	CONCLUSIONS	REFERENCE NUMBER

FINDINGS	CONCLUSIONS	REFERENCE NUMBER

SECTION 6

PROBLEM-SOLVING

Form 19: STATEMENT OF PROBLEM AND ROOT CAUSES

This is the first of three forms used in the step-by-step problem-solving approach to analyzing and developing solutions to management problems. Use this form to state each problem that you identify and its root causes. The completed form will be the basis for further analysis.

STATEMENT OF THE PROBLEM	
What is the problem?	
When and how often does it occur?	
How does the problem affect health management?	
How severe is the impact?	
Where does the problem occur?	
Who is affected by the problem?	
Who is responsible for the work activity where the problem occurs?	
ROOT CAUSE(S) OF THE PROBLEM	
1.	
2.	
3.	

This is the second form in the problem-solving approach to solving management problems. Use this form to identify factors that either constrain actions toward reaching a solution or help in reaching a solution. The completed form will be the basis for further analysis.

CONSTRAINING FORCES	HELPING FORCES

Form 21: ALTERNATIVE PROBLEM-SOLVING APPROACHES

This is the third of three forms in the problem-solving approach to solving management problems. Use this form to identify and examine alternative approaches to solving the problems that you have identified. This completed form becomes a reference for developing your final recommendations.

APPROACH	ADVANTAGES	DISADVANTAGES

SECTION 7

ALTERNATIVE RECOMMENDATIONS

Form 22: ALTERNATIVE RECOMMENDATIONS FOR CONCLUSION _____

Complete one copy of this form for each study conclusion that you described on Form 18. For each conclusion develop a minimum of two alternative recommendations, with accompanying justification statements. Rank the recommendations according to priority, with the most desirable listed first. Use as many extra pages as you need. You will submit these recommendations to others in the group decision-making process for management systems improvement.

RECOMMENDATIONS	JUSTIFICATIONS
1.	
2.	
3.	

TRANSPORTATION SYSTEM WORKBOOK

The MEDEX Primary Health Care Series

TRANSPORTATION SYSTEM WORKBOOK

©1983

Health Manpower Development Staff
John A. Burns School of Medicine
University of Hawaii, Honolulu, Hawaii, U.S.A.

Prepared for _____

Prepared by _____

Date completed _____

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Form 13: SUMMARY OF FORM 6		
Form 14: SUMMARY OF FORM 7		
Form 15: SUMMARY OF FORM 8		
Form 16: SUMMARY OF FINDINGS AND CONCLUSIONS		
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- | | |
|--------------------------------------|--------------------|
| Drugs and Medical Supplies | Communication |
| General Supplies | Personnel |
| Facilities and Equipment Maintenance | Finance |
| Transportation | Health Information |

This workbook will help you conduct a comprehensive study of the transportation system leading to recommendations for improving the efficiency and effectiveness of the system. The transportation system is used to provide, protect, and manage transportation resources needed to move health workers, patients, and supplies. The management system workbook consists mainly of forms. The forms will help you collect information in a standardized way so that it can be systematically reviewed and analyzed. Instructions for using the workbook are in the Management Analysis Training Module. The module includes exercises to prepare you to use the workbook forms to conduct an analysis of a management support system. Since management procedures vary for each country's health care system, the workbooks fit no one situation perfectly. Before

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- Omit certain forms or add new ones
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SCHEDULING OF WORK ACTIVITIES**

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Use this form to plan your interview schedule and to keep a record of all the interviews that you conduct. Record the date of the interview and the name, title, address, and telephone number of each person interviewed or to be interviewed. This information will be included as an appendix to your written study report.

DATE	NAME	TITLE	ADDRESS	TELEPHONE

Form 2: LIST OF DOCUMENTS REVIEWED

Record the title, author, publisher, and date of publication for every major written document that you review for your study. Also include the date of the review and the source of the document. The information on this form will be included as an appendix to your written study report and will serve as your reference bibliography.

TITLE	AUTHOR	PUBLISHER/ DATE OF PUBLICATION	DATE REVIEWED	SOURCE OR LOCATION

Form 3: SCHEDULE FOR THE MONTH OF _____

Use this form to schedule and plan your work activities. Complete a new form for each month.

[illegible]

SECTION 3

INFORMATION GATHERING

Form 4: WORK FLOW ANALYSIS

This is a general use form for recording and analyzing the flow of work activities. Keep extra copies of this form available to supplement the interview and survey forms that follow.

Activity			
Begins		Ends	
Location		Date	

PRESENT METHOD		PROPOSED METHOD	
Step Number	Action	Step Number	Action

Form 5: INVENTORY OF PUBLIC TRANSPORTATION

Use this form to survey public transportation resources at the different levels of the primary health care system. First, interview the person in charge of the primary health care facility being surveyed. Later, verify this information by talking to other people in the community or area who use public transportation, such as teachers, merchants, and operators of transportation services. At the community level, include all available transportation resources. At the district level and above, include only those public transportation resources that are relevant to the delivery of primary health care services.

Person interviewed _____		Title _____	Location _____		Date _____
____ Community	____ Health center	____ Region	____ Other _____		
____ Health post	____ District	____ Central Ministry of Health	_____		
Population served _____		Number of service contacts per month _____			

TYPE OF AVAILABLE PUBLIC TRANSPORTATION	FREQUENCY OF USE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 6: INVENTORY OF PROGRAM VEHICLES

Use this form to survey program transportation resources at the different levels of the primary health care system. At the district level and above, interview primary health care administrators. At the community level, survey community health workers to determine their perceptions of the transportation system that serves them. Do not overlook vehicles such as bicycles that may be assigned to health posts. Also include vehicles that are controlled by other government departments but that are used to support primary health care services at the community level. Be specific when noting the type of vehicle. Indicate in the third column whether the vehicle is used primarily to transport patients, deliver supplies, or transport health workers. If one vehicle has multiple uses, indicate the relative importance of the various functions with a percentage estimate.

Person interviewed _____		Title _____		Location _____		Date _____	
____ Community		____ Health center		____ Region		____ Other _____	
____ Health post		____ District		____ Central Ministry of Health		_____	
Population served _____		_____		Number of service contacts per month _____		_____	

TYPE OF VEHICLE	CONDITION	USE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

PREVENTIVE MAINTENANCE PRACTICES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
REPAIR SOURCES AND PRACTICES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

VEHICLE REPLACEMENT PRACTICES				ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Type of Vehicle	Year of Purchase	Purchased By	To Be Replaced By		

Use this form to survey maintenance and repair facilities that service primary health care vehicles. At the community level, these may include bicycle repair shops or even stables for animals. If facilities do not exist at the community level, determine the demand for maintenance and repair services.

Person interviewed _____		Title _____	Location _____		Date _____
Facility _____		Address _____			
TYPES OF VEHICLES SERVICED	SERVICES PROVIDED	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT		

MAINTENANCE AND REPAIR RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Maintenance and repair specialists:		
Tools:		
Working conditions:		

MAINTENANCE AND REPAIR RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Spare parts:		
Funds for vehicle maintenance and repair:		
Other:		

Form 8: POLICIES AND ORGANIZATION OF THE TRANSPORTATION SYSTEM

Use this form to document transportation policies related to the use, maintenance, and replacement of vehicles, and to describe the organization of the transportation system. Attach copies of policy directives, procedures, and organizational charts, as appropriate.

Person interviewed	Title	Location	Date
Community	Health center	Region	Other
Health post	District	Central Ministry of Health	
Population served		Number of service contacts per month	

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Persons authorized to drive vehicles:		
Driver selection and training:		
How, when, and where vehicles may be used:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Daily maintenance:		
Periodic preventive maintenance:		
Vehicle log book:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Reporting of accidents and damage:		
Inoperable vehicles:		
Other:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supervisory chain of command:		
Delegation of responsibility and authority:		
Centralization versus decentralization:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other organizations:		
User participation in planning and decision-making:		
Other:		

Use this form to validate information that you obtain through personal interview. Review the information on the appropriate interview form with persons working at the next higher or next lower organizational levels of the system. Attach this form to the interview form reviewed.

HIGHER ORGANIZATION LEVEL	Person interviewed	Title	Location	Date
Comments:				

LOWER ORGANIZATION LEVEL	Person interviewed	Title	Location	Date
Comments:				

SECTION 4

OBJECTIVES AND FUNCTIONS OF THE
TRANSPORTATION SYSTEM

Form 10: OBJECTIVES OF THE SYSTEM

Use this form to record the present and proposed objectives of the transportation system. Using the information you have gathered, describe what the system is now doing and what it should do in the future to adequately support the delivery of primary health care services.

Present objectives:

Proposed objectives:

Form 11: FUNCTIONS OF THE SYSTEM

Use this form as an organizational responsibility chart to help define the scope of the transportation system. In the first column, record all of the functions of the system that you have identified. In the succeeding columns, indicate which aspect of each function is performed by the various organizational levels of the system. Use the following symbols to note the type of responsibility for each function:

- P -- Prepares or reviews an action
- R -- Recommends an action
- A -- Approves an action
- E -- Executes an action
- M -- Monitors an action

FUNCTIONS	COMMUNITY LEVEL	HEALTH POST LEVEL	HEALTH CENTER LEVEL	DISTRICT LEVEL	REGIONAL LEVEL	CENTRAL OF MINISTRY OF HEALTH LEVEL	OTHER CENTRAL LEVEL

SECTION 5

SUMMARY OF FINDINGS AND CONCLUSIONS

Using Forms 12 to 15

Use Forms 12 to 15 to summarize the information that you have recorded on Forms 5 to 8. Notice that Forms 12 to 15 are similar in format to Forms 5 to 8. This will ease your work in summarizing the information. Use as many extra pages as you need.

Prepare a summary form for each organizational level of the primary health care system. For example, if you gathered information on Form 5 from each of the following organizational levels, you would then prepare six different versions of the same summary form, one for each organizational level:

- Community
- Health post
- Health center
- District
- Central ministry of health
- Other central agency

Form 12: SUMMARY OF FORM 5—INVENTORY OF PUBLIC TRANSPORTATION

<div><div><div>Community</div><div>Health post</div></div><div><div>Health center</div><div>District</div></div><div><div>Region</div><div>Central Ministry of Health</div></div><div><div>Other</div></div></div>			
TYPE OF AVAILABLE PUBLIC TRANSPORTATION	FREQUENCY OF USE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

Form 13: SUMMARY OF FORM 6—INVENTORY OF PROGRAM VEHICLES

<input type="checkbox"/> Community	<input type="checkbox"/> Health center	<input type="checkbox"/> Region	<input type="checkbox"/> Other
<input type="checkbox"/> Health post	<input type="checkbox"/> District	<input type="checkbox"/> Central Ministry of Health	

TYPE OF VEHICLE	CONDITION	USE	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

PREVENTIVE MAINTENANCE PRACTICES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
REPAIR SOURCES AND PRACTICES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

VEHICLE REPLACEMENT PRACTICES				ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Type of Vehicle	Year of Purchase	Purchased By	To Be Replaced By		

Form 14: SUMMARY OF FORM 7—VEHICLE MAINTENANCE AND REPAIR FACILITIES

Type of Facility			
TYPE OF VEHICLES SERVICED	SERVICES PROVIDED	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT

MAINTENANCE AND REPAIR RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Maintenance and repair specialists:		
Tools:		
Working conditions:		

MAINTENANCE AND REPAIR RESOURCES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Spare parts:		
Funds for vehicle maintenance and repair:		
Other:		

Form 15: SUMMARY OF FORM 8—POLICIES AND ORGANIZATION OF THE TRANSPORTATION SYSTEM

<div> <div>Community</div> <div>Health post</div> </div>	<div> <div>Health center</div> <div>District</div> </div>	<div> <div>Region</div> <div>Central Ministry of Health</div> </div>	<div> <div>Other</div> </div>
----------------------------------------------------------	-----------------------------------------------------------	----------------------------------------------------------------------	-------------------------------

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Persons authorized to drive vehicles:		
Driver selection and training:		
How, when, and where vehicles may be used:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Daily maintenance:		
Periodic preventive maintenance:		
Vehicle log book:		

POLICIES	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Reporting of accidents and damage:		
Inoperable vehicles:		
Other:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Supervisory chain of command:		
Delegation of responsibility and authority:		
Centralization versus decentralization:		

ORGANIZATION	ISSUES AND PROBLEMS	SUGGESTIONS FOR IMPROVEMENT
Relationships with other organizations:		
User participation in planning and decision-making:		
Other:		

Form 16: SUMMARY OF FINDINGS AND CONCLUSIONS

Use this form to describe the issues and problems that you have identified in your study. Summarize each issue or problem in the "Findings" column. Assign each conclusion a reference number to link it to the alternative recommendations to be described in Form 20.

<div><div><div>Community</div><div>Health post</div></div><div><div>Health center</div><div>District</div></div><div><div>Region</div><div>Central Ministry of Health</div><div>Other</div></div></div>		
FINDINGS	CONCLUSIONS	REFERENCE NUMBER

FINDINGS	CONCLUSIONS	REFERENCE NUMBER

SECTION 6

PROBLEM-SOLVING

Form 17: STATEMENT OF PROBLEM AND ROOT CAUSES

This is the first of three forms used in the step-by-step problem-solving approach to analyzing and developing solutions to management problems. Use this form to state each problem that you identify and its root causes. The completed form will be the basis for further analysis.

STATEMENT OF THE PROBLEM	
What is the problem?	
When and how often does it occur?	
How does the problem affect health management?	
How severe is the impact?	
Where does the problem occur?	
Who is affected by the problem?	
Who is responsible for the work activity where the problem occurs?	
	ROOT CAUSE(S) OF THE PROBLEM
1.	
2.	
3.	

Form 18: ANALYSIS OF FORCES AFFECTING CHANGE

This is the second form in the problem-solving approach to solving management problems. Use this form to identify factors that either constrain actions toward reaching a solution or help in reaching a solution. The completed form will be the basis for further analysis.

CONSTRAINING FORCES	HELPING FORCES

Form 19: ALTERNATIVE PROBLEM-SOLVING APPROACHES

This is the third of three forms in the problem-solving approach to solving management problems. Use this form to identify and examine alternative approaches to solving the problems that you have identified. This completed form becomes a reference for developing your final recommendations.

APPROACH	ADVANTAGES	DISADVANTAGES

SECTION 7

ALTERNATIVE RECOMMENDATIONS

Form 20: ALTERNATIVE RECOMMENDATIONS FOR CONCLUSION _____

Complete one copy of this form for each study conclusion that you described on Form 16. For each conclusion develop a minimum of two alternative recommendations, with accompanying justification statements. Rank the recommendations according to priority, with the most desirable listed first. Use as many extra pages as you need. You will submit these recommendations to others in the group decision-making process for management systems improvement.

RECOMMENDATIONS	JUSTIFICATIONS
1.	
2.	
3.	



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